Guidelines of OVHA Coverage

ITEMS: CIRCULATORY AIDS

DEFINITIONS:
Pneumatic compressor: a device for providing compression to decrease refractory lymphedema.
Types:
Non-segmented pneumatic compressor: device with a single outflow port.

Segmented pneumatic compressor: device with multiple outflow ports leading to distinct segments on the appliance that inflate sequentially.

Segmented pneumatic compressor without calibrated gradient pressure: device that has the same pressure in each segment or that has a predetermined pressure gradient in successive segments

Segmented pneumatic compressor with calibrated gradient pressure: a device that has a manual control on at least 3 outflow ports, that can deliver an individually determined pressure to each segmental unit.

Segmental pressure pneumatic appliances: sleeves that are used with a non-segmented pneumatic compressor, but which achieve a pressure gradient through the design of the tubing and/or air chambers.

GUIDELINES:
- The individual is under the care of a physician and the device is used with oversight by the physician and physical or occupational therapist certified in lymphedema care by a national certification body AND
- The individual or caregiver has been instructed in the operation of the machine, there is a treatment plan defining the pressure to be used and the frequency and duration of use, and ongoing monitoring of use and response to treatment AND
- Other treatments, including elevation, lymphedema therapy, and custom fabricated gradient wraps and garments have been tried unsuccessfully.
- For individuals with scarring of the lymphatic channels, the device should be considered if there has been ulceration of the lower extremities that has not responded to standard treatment methods such as a compression bandaging system and elevation, despite 6 months of continuous treatment.

APPLICABLE CODES:
E0650 Pneumatic compressor, nonsegmental home model, 1 per lifetime.
E0651 Pneumatic compressor, segmental home model, without calibrated gradient pressure.
E0652 Pneumatic compressor, segmental home model, with calibrated gradient pressure.
E0655 Nonsegmental pneumatic appliance for use with pneumatic compressor, half arm, 1per 5 yrs.

E0660 Nonsegmental pneumatic appliance for use with pneumatic compressor, full leg, 1 per 5 yrs.
E0665 Nonsegmental pneumatic appliance for use with pneumatic compressor, full arm. 1 per 5 yrs.
E0666 Nonsegmental pneumatic appliance for use with pneumatic compressor, half leg. 1 per 5 yrs.
E0667 Segmental pneumatic appliance for use with pneumatic compressor, full leg.
E0668 Segmental pneumatic appliance for use with pneumatic compressor, full arm.
E0669 Segmental pneumatic appliance for use with pneumatic compressor, half leg.
E0671 Segmental gradient pressure pneumatic appliance, full leg.
E0672 Segmental gradient pressure pneumatic appliance, full arm.
E0673 Segmental gradient pressure pneumatic appliance, half leg.

CAUTIONS:
Contraindications: Individuals with arterial insufficiency have increased peripheral resistance, and compression will increase the resistance.
Infection at the site of treatment may be spread by introducing bacteria into the lymphatic or venous drainage.
Any thrombi present may become mobile.
Individuals with cardiac dysfunction may not be able to tolerate the increased workload on the heart generated by increased peripheral resistance. (Hayes)

EXAMPLES OF DIAGNOSES: Radical surgical procedures with removal of regional groups of lymph nodes, post radiation fibrosis, spread of malignant tumors to regional lymph nodes with lymphatic obstruction, scarring of lymphatic channels such as in venous insufficiency and recurrent cellulitis, congenital anomalies.

REQUIRED DOCUMENTATION: Current, complete Certificate of Medical Necessity that includes applicable diagnosis; documentation providing evidence that the device will be used with oversight by the physician and physical or occupational therapist certified in lymphedema care by a national certification body; documentation that the individual or caregiver has been instructed in the operation of the machine, there is a treatment plan defining the pressure to be used and the frequency and duration of use, and ongoing monitoring of use and response to treatment; documentation demonstrating that other treatments, including elevation, lymphedema therapy, and custom fabricated gradient wraps and garments have been tried unsuccessfully.

REFERENCES:
Hayes, K. Manual for Physical Agents. 1993, Appleton and Lange, Norwalk, CT.

Region A DMERC Supplier Manual. Revised 1998.HCFA.

Medical Director's signature:_____

OVHA Director's signature:_____

Date:
Revision 1:
Revision 2:
Revision 3: